



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Applicant: *Hyun S. Kim et al.*

Serial No.: 10/083,083

Filed: 2/26/02

For: Supplemental Restraint System

Attorney

Docket No.: 3672-86512

Group No.: 3616

Examiner: Ruth Ilan

M. Kim
10/16/03
9/B
[Signature]
[Signature]

AMENDMENT AND REPLY

Mail Stop No--Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

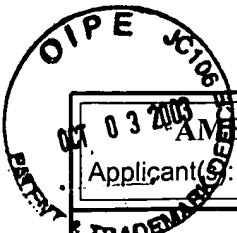
Sir:

In Response to the Office Action of August 1, 2003, please amend the application as follows:

Do Not
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10/22/03

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OCT 07 2003
GROUP 3600

3616



| | | | |
|--|----------------------------------|------------------------------|---------------------------------|
| AMENDMENT TRANSMITTAL LETTER (Small Entity) | | | Docket No. 3672-86512 |
| Applicant(s): Hyun S. Kim et al. | | | |
| Serial No. 10/083,083 | Filing Date 02/26/2002 | Examiner Ruth Ilan | Group Art Unit 3616 |

Invention: **SUPPLEMENTAL RESTRAINT SYSTEM**

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.
- ☐ A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.

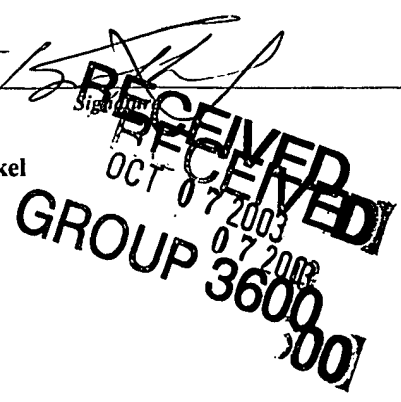
The fee has been calculated and is transmitted as shown below.

| CLAIMS AS AMENDED | | | | | |
|--|-------------------------------------|-----------------------------|--------------------------------|---------|-------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 20 - | 23 = | 0 x | \$9.00 | \$0.00 |
| INDEP. CLAIMS | 3 - | 3 = | 0 x | \$42.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **23-0920**
 - ☒ Any additional filing fees required under 37 C.F.R. 1.16.
 - ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: **September 30, 2003**

Daniel M. Gurfinkel
Reg. No. 34,177



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| I certify that this document and fee is being deposited on 9/30/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | |
| Signature of Person Mailing Correspondence | |
| Daniel M. Gurfinkel Typed or Printed Name of Person Mailing Correspondence | |

CC: